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| Issue Classification  | Application/Control No. 09/309,360 | Applicant(s)/Patent under Reexamination LIM ET AL. |
| | Examiner Jenise E. Jackson | Art Unit 2131 |

| ISSUE CLASSIFICATION | | | | | | | | | | | | | | |
|----------------------|-----------------------------------|----------|-----|-----|------------------------------|----|---|----|-----|-------------|----|---|----|------|
| ORIGINAL | | | | | INTERNATIONAL CLASSIFICATION | | | | | | | | | |
| CLASS | | SUBCLASS | | | CLAIMED | | | | | NON-CLAIMED | | | | |
| 726 | | 2 | | | G | 06 | F | 12 | /02 | G | 06 | F | 15 | /173 |
| CROSS REFERENCES | | | | | G | 06 | F | 13 | /28 | | | | | |
| CLASS | SUBCLASS (ONE SUBCLASS PER BLOCK) | | | | | | | | | | | | | |
| 713 | 155 | 162 | 165 | 166 | H | 04 | L | 9 | /00 | | | | | |
| 713 | 167 | 176 | 179 | 180 | | | | | | | | | | |
| 726 | 1 | 3 | | | | | | | | | | | | |
| 709 | 223 | 224 | 225 | 226 | | | | | | | | | | |
| 709 | 229 | | | | | | | | | | | | | |

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| Jenise E. Jackson 8/3/06 (Assistant Examiner) (Date) | KAVAZ SHEIKH SUPERVISOR TECHNICAL CENTER 2100 (Primary Examiner) (Date) 8/5/06 | Total Claims Allowed: 30 |
| (Legal Instruments Examiner) (Date) | O.G. Print Claim(s) 25 | O.G. Print Fig. 5A |

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|--|----------|-------|----------|-------|----------|-------|----------|-------|----------|------------------------------|----------|-------------------------------|----------|---------------------------------|----------|
| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant | | | | | | | | | | <input type="checkbox"/> CPA | | <input type="checkbox"/> T.D. | | <input type="checkbox"/> R.1.47 | |
| Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| 1 | 1 | 15 | 31 | | 61 | | 91 | | 121 | | 151 | | 181 | | |
| 2 | 2 | 16 | 32 | | 62 | | 92 | | 122 | | 152 | | 182 | | |
| | 3 | 17 | 33 | | 63 | | 93 | | 123 | | 153 | | 183 | | |
| | 4 | 18 | 34 | | 64 | | 94 | | 124 | | 154 | | 184 | | |
| 3 | 5 | 19 | 35 | | 65 | | 95 | | 125 | | 155 | | 185 | | |
| 4 | 6 | 20 | 36 | | 66 | | 96 | | 126 | | 156 | | 186 | | |
| 5 | 7 | | 37 | | 67 | | 97 | | 127 | | 157 | | 187 | | |
| 6 | 8 | | 38 | | 68 | | 98 | | 128 | | 158 | | 188 | | |
| 7 | 9 | | 39 | | 69 | | 99 | | 129 | | 159 | | 189 | | |
| 8 | 10 | | 40 | | 70 | | 100 | | 130 | | 160 | | 190 | | |
| 9 | 11 | | 41 | | 71 | | 101 | | 131 | | 161 | | 191 | | |
| 10 | 12 | | 42 | | 72 | | 102 | | 132 | | 162 | | 192 | | |
| 21 | 13 | | 43 | | 73 | | 103 | | 133 | | 163 | | 193 | | |
| 22 | 14 | | 44 | | 74 | | 104 | | 134 | | 164 | | 194 | | |
| | 15 | | 45 | | 75 | | 105 | | 135 | | 165 | | 195 | | |
| | 16 | | 46 | | 76 | | 106 | | 136 | | 166 | | 196 | | |
| 23 | 17 | | 47 | | 77 | | 107 | | 137 | | 167 | | 197 | | |
| 24 | 18 | | 48 | | 78 | | 108 | | 138 | | 168 | | 198 | | |
| 25 | 19 | | 49 | | 79 | | 109 | | 139 | | 169 | | 199 | | |
| 26 | 20 | | 50 | | 80 | | 110 | | 140 | | 170 | | 200 | | |
| 27 | 21 | | 51 | | 81 | | 111 | | 141 | | 171 | | 201 | | |
| 28 | 22 | | 52 | | 82 | | 112 | | 142 | | 172 | | 202 | | |
| 29 | 23 | | 53 | | 83 | | 113 | | 143 | | 173 | | 203 | | |
| 30 | 24 | | 54 | | 84 | | 114 | | 144 | | 174 | | 204 | | |
| 11 | 25 | | 55 | | 85 | | 115 | | 145 | | 175 | | 205 | | |
| 12 | 26 | | 56 | | 86 | | 116 | | 146 | | 176 | | 206 | | |
| | 27 | | 57 | | 87 | | 117 | | 147 | | 177 | | 207 | | |
| | 28 | | 58 | | 88 | | 118 | | 148 | | 178 | | 208 | | |
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|-------------------------------------|-----------------------------------|----------|-----|--|------------------------------|--|--|--|-----------------------|--|-----------------|
| ORIGINAL | | | | | INTERNATIONAL CLASSIFICATION | | | | | | |
| CLASS | | SUBCLASS | | | CLAIMED | | | | NON-CLAIMED | | |
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| CROSS REFERENCES | | | | | | | | | | | |
| CLASS | SUBCLASS (ONE SUBCLASS PER BLOCK) | | | | | | | | | | |
| 711 | 1 | 100 | 111 | | | | | | | | |
| 713 | 181 | | | | | | | | | | |
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| (Assistant Examiner) (Date) | | | | | | | | | Total Claims Allowed: | | |
| (Legal Instruments Examiner) (Date) | | | | | (Primary Examiner) (Date) | | | | O.G. Print Claim(s) | | O.G. Print Fig. |

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|--|----------|--|-------|----------|--|-------|----------|--|-------|------------------------------|--|-------------------------------|----------|---------------------------------|-------|----------|
| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant | | | | | | | | | | <input type="checkbox"/> CPA | | <input type="checkbox"/> T.D. | | <input type="checkbox"/> R.1.47 | | |
| Final | Original | | Final | Original | | Final | Original | | Final | Original | | Final | Original | | Final | Original |
| | 211 | | | 241 | | | 271 | | | 301 | | | 331 | | | 361 |
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